PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

| Effective December 8, 2004 | | | | | | | | | 110// 56 / 3.3.3 | | | | |
|--|--|--|--|-------------------------------|--------------------------|----------------------------------|----------|---|------------------------|----|----------------------------|------------------------|--|
| | , | CLAIMS A | AS FILED - | | (Column 2) | | | SMALL ENT | ITY OR | | OTHER THAN SMALL ENTITY | | |
| U.S | . NATIONAL : | STAGE FEES | | | | |] | RATE | FEE | 1 | RATE | FEE | |
| BAS | IC FEE | | | | | | 1 | BASIC FEE | | OR | BASIC FEE | 300 | |
| EXAMINATION FEE | | | | | | | 1 | EXAM. FEE | | 1 | EXAM. FEE | 200 | |
| SEARCH FEE | | | | | | | | SEARCH FEE | | | SEARCH FEE | 400 | |
| FEE FOR EXTRA SPEC. PGS. | | | minus 100 = | | / 50 = | | 1 | X \$ 125 = | | | X \$ 250 = | ' | |
| TOTAL CHARGEABLE CLAIMS | | | 22 minus 20 = | | * 2 | | | X \$ 25 = | | OR | X \$ 50 = | 100 | |
| INDEPENDENT CLAIMS | | | minus 3 = | | * | | 1 | X \$ 100 = | | OR | X \$ 200 = | | |
| MUL | TIPLE DEPEN | DENT CLAIM PR | ESENT | | | | 1 | + \$ 180 = | | OR | + \$ 360 = | | |
| * If | the difference | in column 1 is | less than zero | , enter "(| " in column 2 | | | TOTAL | | OR | TOTAL | 1000 | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST | | | | | | | | OTHER THAN SMALL ENTITY OR SMALL ENTITY | | | | | |
| AMENDMENT A | | REMAINING AFTER AMENDMENT | | NUM PREVIO PAID | BER OUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | | = | | X \$ 25 = | | OR | X \$ 50 = | | |
| | Independent | * | Minus | *** | | = | | X \$ 100 = | | OR | X \$ 200 = | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT (| | | | CLAIM | . 🗆 | | + \$ 180 = | | OR | + \$ 360 = | | |
| | | | | | | , | | TOTAL ADDIT. FFF | | OR | TOTAL ADDIT. FFF | | |
| | | (Column 1) | | (Colur | nn 2) | (Column 3) | | | | | • | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | EST BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | | = | | X \$ 25 = | | OR | X \$ 50 = | | |
| | Independent | * | Minus | ***` | | = | | X \$ 100 = | | OR | X \$ 200 = | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT O | | | | CLAIM | | | + \$ 180 = | | OR | + \$ 360 = | | |
| | | | | | | | | TOTAL ADDIT. FFF | | OR | TOTAL ADDIT. FFF | , | |
| * ** | If the "Highest No If the "Highest No | umn 1 is less than th umber Previously Pa umber Previously Pai mber Previously Paic | id For" IN THIS SP id For" IN THIS SP | ACE is les | s than '2' s than '3' | 0', enter "20". ', enter "3". | d in the | e appropriate hov | (In column | | | | |
| | | | | | 7755 | | 3.77 | | | | | | |